## Madison County Weed Board P.O. Box 278\*Virginia City, Montana 59755\*(406)842-5595\*(406)842-5596\* fax

## **Opencut/Utility Noxious Weed Control Management Plan**

Plan#	Date		
I. Contractor name and location of mine/disturbance site:  A. Name: Address:			
Phone#			
B. Location:			
a. Legal Description:1/41/41/4 SectionTownshipRange	<b>!</b> 		
C. A MAP identifying or locating the Ownership or area being	mined/disturbed must be included		
D. Pit Name or Utility Site Name(if applicable):  II. Noxious Weed Data:  A. Types of Noxious Weeds:			
B. Acres of infestation by weed species and land use. (use data	a key-2nd pg.)		
	ronmental & ty Factors		
Example: S. knapweed 4 Residential Tree	s/Garden/Creek		
1,			
III. Control activities:  A. Types of Control: (1) Chemical(2) Biological (3) Cultural(4) Other			
B. Control Methods: (1) Handgun (Ground Boom) (3) Aerial Application (4) Other			
C. Who will conduct the control activity (applicator):  (1) Self (2) Neighbor (3) Commercia  (4) Other	al Applicator		
IV. Other plans for present control: ( Time of control, Herbicides used rates, monitoring, etc.)			
V. Plans for future Noxious Weed Control: (Monitoring plans- vegetate points, employee awareness. Herbicide use plans. Bio etc.)	logical use plans.		

	dress plans for reseedings, other areas where bar		disturbed areas such as roadsides, ed:	
Noxious Weed Data K	<u>еу:</u>			
	ed 23.Saltcedar eed 24. Blueweed 25. Orange Haw 26. Meadow Ha 27.Scotch Broor flax 28. Sulfur Cinqu 29. Tall Buttercu 30. Yellowflag Ir cress) 31. Curly Leaf P 32. Hoary Alyss 33. Hydrilla e 34. Knotweed C 35. Perennial Pe 36. Cheatgrass	wkweed wkweed Complex m uefoil up ris condweed um complex epperweed	A. Cultivated Cropland B. Cultivated Hayland C. Irrigated Pasture (range) D. Native Rangelands E. Riparian Lands F. Timber Lands G. Mining Lands H. Residential Site (rural) I. Residential Site (urban) J. Commercial (rural) K. Commercial (Urban) L. Recreation M. Non-use	
Contractor/Landowner(Signature)			( Chairperson Signature)	
(Date)	 -	(Date)		
must have his/her N	Board will accept this	lace on this documer	lan for Approval, the Applicant it. The Weed Board Chairperson	
A. Approval-		Date:		
B. Approval with modifications-			Date:	
	commendations & Reasc	ons: Should the Board h	nave any recommendations to assist will be sent to the landowner.	
STATE OF MONTA				
COUNTY OF MAD	( ss. ISON)			
On thisday of of Montana, personal whose name is subso	, 20, be ly appeared cribed this instrument wa	s signed and sworn to	ed Notary Public in and for the State, known to me to be the person before me as the same.	
IN WITNESS WHER above written.	EOF, I have hereunto se	t my hand and affixed r	my notarial seal the day and year first	
		Notary Public of the	e State of Montana	
		Residing at My Commission Ex	xpires	